2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004890

City-St-Zip:

NAPLES, FL 34114

FILED Apr 29, 2008 Secretary of State

Entity Name: JUNGLE PLUM WEST OF FOREST GLEN NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: PARADISE PROPERTY MANAGEMENT PARADISE PROPERTY MANAGEMENT 810 ANCHOR RODE DR 802 ANCHOR RODE DR NAPLES, FL 34103 NAPLES, FL 34103 **Current Mailing Address:** New Mailing Address: PARADISE PROPERTY MANAGEMENT PARADISE PROPERTY MANAGEMENT 810 ANCHOR RODE DR 802 ANCHOR RODE DR NAPLES, FL 34103 NAPLES, FL 34103 FEI Number: 65-1096564 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BECKER & POLIAKOFF** 999 VANDERBILT BEACH ROAD SUITE 501 NAPLES, FL 34108 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TAKACH, JOHN Name: Name: 3686 JUNGLE PLUM DR WEST Address: Address: City-St-Zip: NAPLES, FL 34114 City-St-Zip: Title: () Delete Title: (X) Change () Addition PATTERSON, RICHARD Name: DAUGHERTY, WAYNE Name: Address: 3679 JUNGLE PLUM DR WEST Address: 3718 JUNGLE PLUM DR. WEST City-St-Zip: NAPLES, FL 34114 City-St-Zip: NAPLES, FL 34114 Title: () Delete Title: (X) Change () Addition RAITHEL, DAVE RAITHEL, DAVE Name: Name: 3683 HUNGLE PLUM DRIVE WEST 3683 JUNGLE PLUM DRIVE WEST Address: Address: City-St-Zip: NAPLES, FL 34114 City-St-Zip: NAPLES, FL 34114 Title: (X) Delete Title: () Change () Addition DAUGHERTY, WAYNE Name: Name: 3718 JUNGLE PLUM DR. W. Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOHN TAKACH PRES 04/29/2008